IDAHO STATE BOARD OF MEDICINE 1755 WESTGATE DRIVE, SUITE 140 BOISE, IDAHO 83704



THE REPORT

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Our Medical Profession

By William A. Cone, MD, Idaho State Board of Medicine

My involvement as a member of the board of Medicine over the past year has been a very rewarding experience. Through this association, I have become involved in dealing with numerous challenging physician issues facing the Board. Thankfully, these cases involve a relatively small number of the physicians licensed to practice medicine in the state of Idaho. Complaints are addressed and public safety is assured. If there is one central concept that might tie these diverse issues together, it is what we call *professionalism*. In my training in the early 80s, the topic of professionalism wasn't a major focus of the medical curriculum or clinical training. An elective course in medical ethics was about the extent of the lecture material presented. Hopefully, professionalism was something you saw in your mentors and worked to emulate. It certainly didn't seem to be something one learned out of a book. The last several years I have been involved with the WWAMI program as an instructor. Elements of professionalism are indeed now in the medical curriculum. Aspects of the physician-patient relationship, ethical dilemmas, cultural diversity, and issues regarding confidentiality are part of the discussion.

So, what is professionalism? What is a profession? The words profession and professional are derived from the Latin word profession, which means a public declaration with the force of a promise. Professions are groups of individuals who 'declare' to society to behave in certain ways and serve some social goal. Professionals usually follow a 'code of ethics', which states a set of standards to which they hold their members. What about the medical profession in particular? The Charter on Medical Professionalism* was released in 2002 as a joint project by the American Board of Internal Medicine Foundation, the American College of Physicians-American Society of Internal medicine Foundation, and the European Federation of Internal Medicine. It followed the guiding principles of primacy of patient welfare, patient autonomy, and social justice. The charter identified 10 fundamental principles:

Professional competence Honesty with patients

Patient confidentiality Maintaining appropriate relations with patients

Improving quality of care Improving access to care

Scientific knowledge Just distribution of finite resources

Professional responsibilities Maintaining trust by managing conflicts of interest

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NOTICE This newsletter is the only information newsletter published by the Idaho Board of Medicine and serves as the Board's notification of rule changes, policy information, and discipline information provided to all licensees of the Idaho Board of Medicine.

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Our Medical Profession (continued from page 1)

How does professionalism relate to the Board of Medicine and its role in protecting the public and assuring the safe practice of medicine? Certainly the scope of the above charter goes beyond issues that may come before the Board. However, there are complaints that often reflect a lack of professionalism or failure to meet the aforementioned responsibilities. Sometimes issues of professional competence are raised. If substance abuse is involved, is the physician's ability to safely carry out his/her day to day clinical duties compromised? Boundary issues are not uncommon Does the physician maintain a professional stance in the physician-patient relationship, or has the line been crossed? In some cases a physician's basic scientific knowledge comes into question. Lastly, the fact that a complaint was filed in the first place may reflect a communication issue between physician and patient. What part did the physician's attitude, biases, and/or behavior play?

The concept of professionalism is broad, but an important aspect to issues that come before the board. These days, professionalism is often threatened. Health care politics, managed care, pharmaceutical industry influences all play a role in our daily activities as we care for our patients. So, what is the future of our profession? Medical education is at least part of the answer. What we as a medical profession pass on to medical students, residents, and our younger colleagues is more important than ever. Medical education is expanding in Idaho. Medical students can now complete year one, three and, four in-state. The WWAMI program at UI-WSU enrolls 20 Idaho first year students (40 total), hopefully, with an expansion in the near future. At present, 26 MS3 and 12 MS4 students are rotating at sites in Idaho. Between the residency programs in family practice, internal medicine and psychiatry, there are 75 residents being trained in-state at this time. As professionals, we have the opportunity, and I believe, the privilege, to impact these students and their development as physicians. They will have lectures about boundaries, conduct and confidentiality. Ultimately though, our level of professionalism, how we relate to each other, how we interact with our patients, may have the greatest impact. Hopefully, for the better and for the good of the patients we all serve.

* For more information regarding the Charter on Medical Professionalism, go to http://www.abimfoundation.org/ Professionalism/Physician%20Charter.aspx

Chaperones

Irrespective of whether or not an official policy exists, providers are strongly encouraged to have a chaperone present when performing breast and/or genitalia examinations. Following a 1998 study, the AMA concluded, "From the standpoint of ethics and prudence, the protocol of having chaperones available on a consistent basis for patient examinations is recommended." This guidance may be found in the Code of Medical Ethics of the American Medical Association (2010-2011 Edition) or by going to this site:

http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion821.shtml

Supervising Physicians: Did you know?

Supervising physicians are responsible for the direction and supervision of the medical acts and patient services provided by an intern, extern, or resident.

The direction and supervision of such activities shall include, but are not limited to: **a.** An on-site visit at least monthly to personally observe the quality of care provided; **b.** Recording of a periodic review of a representative sample of medical records to evaluate the medical services that are provided; and **c.** Regularly scheduled conferences between the supervising physician and the intern, extern, or resident.

Supervising physicians must always be available either in person or by telephone to supervise, direct and counsel the intern, extern, or resident.

Review "Duties of Supervising Physicians" at http://adm.idaho.gov/adminrules/rules/idapa22/0104.pdf

Legislative Changes

The 2010 Idaho Legislature approved a change to IDAPA 22.01.01, "Rules of the Board of Medicine for the Licensure to Practice Medicine and Surgery and Osteopathic Medicine and Surgery in Idaho." The Rule change allows the Board the authority to share information with other state boards.

The 2010 Legislature also approved two changes to Idaho Code Title 54, Chapter 18 (the Medical Practice Act). The first change (section 54-1807) allows the Board to issue investigative subpoenas for information and records necessary to complete an investigation. The second change (section 54-1807) revises provisions relating to physician assistants by repealing section 54-1807 (2) and adding a new section 54-1807A to clarify and expand the provisions for licensure, regulation and physician supervision; to create a physician assistant advisory committee; and to provide for the independent ownership of a medical practice.

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Explanation of terms:

- Stipulation: an agreement, admission, or concession.
- Stipulation and Order: an agreement between the Board and the practitioner regarding authorization to practice or placing terms or conditions on the authorization to practice.
- Suspension: temporary withdrawal of authorization to practice.
- Reprimand: a formal admonishment of conduct or practice.
- Revocation: cancellation of the authorization to practice.

PLEASE NOTE: Licensees may have similar names, please verify information by license number!

2010 Complaints

Complaints received—194

Cases opened—123

Non-jurisdictional —71

PUBLIC BOARD ACTIONS

(September 2009—August 2010)

Details regarding the following public actions may be obtained by going to the "Disciplinary Actions" tab on the Board of Medicine website http://bom.idaho.gov

Physicians

Hill, Richard C., MD

M– 4478 Blackfoot, ID Order Terminating Stipulation and Order 3/24/2010

McLaughlin, Daniel W., MD

M-6457 Idaho Falls, ID Order Terminating Stipulation and Order 7/6/2010

Sasich, Randy L., MD

M-10550 Kelso, WA Notice of Satisfaction and Removal of Order 9/28/2009

Tajen, Nejat M., MD

M-5525 Knoxville, TN Reciprocal Order 7/28/2010

Wang, Yihan, MD

M-10886 Brentwood, TN Order Imposing Fine 6/21/2010

Goates, Michael G. MD

Orem, UT Denial of Licensure 7/28/2010

Physician Assistants

Fagan, Sara K., PA

PA-76 Notice of Satisfaction of Fine 12/29/2009 Page 4 The Report

Online Renewal

The 2010 online renewal process was not without a few frustrations; however, overall, the new system proved to be successful. The Board staff appreciates the patience you demonstrated while we worked out the glitches that are inherent in any new undertaking. Our goal is to provide you with the best possible customer service. Your suggestions and feedback are always welcome. You may contact the Board staff at info@bom.idaho.gov or 208.327.7000.

IDAHO STATE BOARD OF MEDICINE

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ALLIED HEALTH BOARD MEETINGS

Meetings are held in the Board office unless otherwise noted.

The **Board of Athletic Trainers** meeting is scheduled for **February 28, 2011 at 9:30 a.m.**

The **Dietetic Licensure Board** meeting is scheduled for **October 5, 2010, at 11:00 a.m.**

The Respiratory Therapy Licensure Board meeting is scheduled for September 23, 2010 at 9:30 a.m.

The Physician Assistant Advisory Committee meeting is scheduled for October 4, 2010 at 12:30 p.m.

BOARD STAFF

Imelda J. Weddington, PhD, Executive Director

Mary Leonard, Associate Director

Cathleen Morgan, Board Attorney

Beverly Kendrick, Quality Assurance Specialist

Cynthia Michalik, Quality Assurance Specialist

Janet Whelan, Quality Assurance Specialist

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> Phone: 208-327-7000 Fax: 208-327-7005 E-mail: info@bom.idaho.gov

Please remember to report all name and/or address changes to the Board of Medicine!